

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 28, 2005 8:00 am**  
**Secretary of State**

03-28-2005 90058 015 \*\*\*\*\*70.00

40040000



03092005 Chg-NP CR2E037 (10/03)

<b>DOCUMENT # 735897</b> 1. Entity Name HIGHLANDS ASSOCIATION OF REALTORS, INC.					
Principal Place of Business 815 US 27 SOUTH SEBRING, FL 33870 US				Mailing Address 815 US 27 SOUTH SEBRING, FL 33870 US	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1684961	
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BURKE, ARIANNA J 815 US 27 SOUTH SEBRING, FL 33870			Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span>FL</span> <span>Zip Code</span> </div>		
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP CARTER, RONNIE T 1843 US 27 SOUTH SEBRING, FL 33870	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPE CARTER, PERRY W 1843 US 27 SOUTH SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition → Please see attached	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP BOCK, TERESA 2617 US 27 SOUTH SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition → Please see attached	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS WOOD, NANCY 2521 US 27S SEBRING, FL 33870	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT WOOD, JAMES W JR 1753 US 27 S SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition → Please see attached	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AE BURKE, ARIANNA T 815 US 27 SOUTH SEBRING, FL 33870	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition → Please see attached	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE:</b> <i>Arianna Gordon Burke</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			Date: <i>3/9/05</i>		Daytime Phone #: <i>863-385-6014</i>

# ATTACHMENT

40040386  
# 735 897

Following is a *complete* list of our Directors and Officers

President

Hesselink, Robert  
2521 US 27 South  
Sebring, Florida 33870

President Elect

Boring, Linda  
809 US 27 South  
Sebring, Florida 33870

Vice-President

Bond, Anne  
4900 Sun N Lake Blvd  
Sebring, Florida 33872

Treasurer

Bock, Teresa  
2521 US 27 South  
Sebring, Florida 33870

Secretary

Ludwig, Jeff  
3750 US 27 North A-3  
Sebring, Florida 33870

Director

Wood, James  
1743 US 27 South  
Sebring, Florida 33870

Director

Karlson, Greg  
721 US 27 South  
Sebring, Florida 33870

Director

Stamats, Naydeen  
4800 Haw Branch Road  
Sebring, Florida 33872

# ATTACHMENT

Director  
Dell, Dawn  
107 Circle Park Drive  
Suite B  
Sebring, Florida 33870

40040386  
#735897

Director  
Williams, Debbie  
809 US 27 South  
Sebring, Florida 33870

Past President/Director  
Carter, Perry  
1843 US 27 North  
Sebring, Florida 33872

MLS Director  
Fricker, Lowell  
1843 US 27 North  
Sebring, Florida 33872

Association Executive  
Burke, Arianna Jordan  
815 US 27 South  
Sebring, Florida 33870